

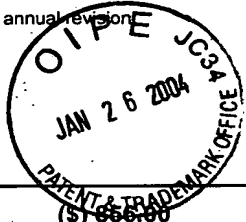
RCE/3187
\$270

PTO/SB/17 (08-80)
Approved for use through 9/30/2000. OMB 0691-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL

Patent fees are subject to annual revision.



Complete If Known

Application Number	08/931,125
Filing Date	16 September 1997
First Named Inventor	Hae-Seung Lee
Examiner Name	Gary PORTKA
Group/Art Unit	2187
Attorney Docket No.	P54508

TOTAL AMOUNT OF PAYMENT

(\$) ~~856.00~~

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number: 02-4943
Deposit Account Number: _____

- ☐ Charge Any Additional Fee Required Under 37 C.F.R. §1.16 and 1.17.
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed: (CHECK #45209)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	\$
1002	340	2002	170	Design filing fee	\$
1003	530	2003	265	Plant filing fee	\$
1004	770	2004	385	Reissue filing fee	\$
1005	160	2005	80	Provisional filing fee	\$

SUBTOTAL (1) (\$).00

2. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total claims	-20** =	x	=	
Independent Claims	4 - 3** =	1 x	86.00	= 86.00
Multiple Dependent				=

** or number previously paid, if greater; For Reissues, see below

Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
1201	86	2201	43	Independent claims in excess of 3	
1202	18	2202	9	Claims in excess of 20	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)86.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge-late filing fee or oath	\$
1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	\$
1053	130	1053	130	Non-English specification	\$
1812	2,520	1812	2,520	For filing a request for reexamination	\$
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	\$
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	\$
1251	110	2251	55	Extension for reply within first month	\$
1252	420	2252	210	Extension for reply within second month	\$
1253	950	2253	475	Extension for reply within third month	\$
1254	1,480	2254	740	Extension for reply within fourth month	\$
1255	2,010	2255	1,005	Extension for reply within fifth month	\$
1401	330	2401	165	Notice of Appeal	\$
1402	330	2402	165	Filing a brief in support of an appeal	\$
1403	290	2403	145	Request for oral hearing	\$
1451	1,510	1451	1,510	Petition to institute a public use proceeding	\$
1452	110	2452	55	Petition to revive - unavoidable	\$
1453	1,330	2453	665	Petition to revive - unintentional	\$
1501	1,330	2501	665	Utility issue fee (or reissue)	\$
1502	480	2502	240	Design issue fee	\$
1503	640	2503	320	Plant issue fee	\$
1460	130	1460	130	Petitions to the Commissioner	\$
1807	50	1807	50	Processing fee for provisional applications	\$
1806	180	1806	180	Submission of Information Disclosure Statement	\$
8021	40	8021	40	Recording each patent assignment per property (Times number of properties)	\$
1809	770	2809	385	Filing a submission after final rejection (37 C.F.R. §1.129(a))	\$
1810	770	2810	385	For each additional invention to be examined (37 C.F.R. §1.129(b))	\$
1801	770	2801	385	Request for Continued Examination (RCE)	\$770.00
Other Fee (specify) _____					\$
Other Fee (specify) _____					\$

** Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$770.00

SUBMITTED BY

Typed or Printed Name: Robert E. Bushnell, Esq.

Signature: *Robert E. Bushnell*

Date: 26 January 2004

Complete (if applicable)

Reg. Number: 27,774

Deposit Account User ID

REB/kf

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.